Image# 15950807373 PAGE 1 / 14

FEC FORM 3Y

REPORT OF RECEIPTS AND DISBURSEMENTS

| TORIW 3X | For Other Than An Aut | horized Committee | Office Use Only |
|---|-------------------------------------|--|--|
| NAME OF COMMITTEE (in full) | TYPE OR PRINT ▼ | Example: If typing, ty over the lines. | /pe 12FE4M5 |
| American Council of | Life Insurers Political A | Action Committee | |
| | | | |
| ADDRESS (number and street) | 101 Constitution Ave., NW Suite 700 | | |
| Check if different than previously reported. (ACC) | Washington | | DC 20001 - |
| 2. FEC IDENTIFICATION | NUMBER ▼ CIT | ΓΥ ▲ | STATE ▲ ZIP CODE ▲ |
| C C00147066 | | S THIS NEW (N) | OR AMENDED (A) |
| 4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: | Report Due On: | | 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election |
| (a) Quarterly Reports: April 15 | Apr | 20 (M4) Jul 20 | O (M7) Oct 20 (M10) Jan 31 (YE) |
| Quarterly Report July 15 Quarterly Report | (C) 12-Day | Primary (12P) | General (12G) Runoff (12R) |
| October 15 Quarterly Report | Report for the: | Convention (12C) | Special (12S) |
| January 31 Year-End Report | ` ′ | on on | in the State of |
| July 31 Mid-Year Report (Non-elec Year Only) (MY) | | General (30G) | Runoff (30R) Special (30S) |
| Termination Repo (TER) | ort Electic | on on | in the State of |
| 5. Covering Period | 01 | through | 01 |
| I certify that I have examined | this Report and to the best of | my knowledge and belief | it is true, correct and complete. |
| Type or Print Name of Treasu | rer Mr. Donald L. Walker | | |
| Signature of Treasurer $\stackrel{Mi}{-}$ | r. Donald L. Walker | [Electronically File | d) Date 02 20 2015 |
| NOTE: Submission of false, erro | oneous, or incomplete informatio | n may subject the person s | signing this Report to the penalties of 2 U.S.C. §437g. |
| Office Use Only | | | FEC FORM 3X Rev. 12/2004 |

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

American Council of Life Insurers Political Action Committee

Report Covering the Period: From: 01 01 2015 To: 01 31 2015

| | | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|-----|--|-------------------------|-----------------------------------|
| 6. | (a) Cash on Hand January 1, 2015 | | 620787.98 |
| | (b) Cash on Hand at Beginning of Reporting Period | 620787.98 | |
| | (c) Total Receipts (from Line 19) | 13072.97 | 13072.97 |
| | (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 633860.95 | 633860.95 |
| 7. | Total Disbursements (from Line 31) | 76005.00 | 76005.00 |
| 8. | Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 557855.95 | 557855.95 |
| 9. | Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. | Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Council of Life Insurers Political Action Committee

| Report Covering the Period: From: | 01 01 2015 To: | COLUMN B | | | |
|--|-------------------|-----------------------|--|--|--|
| I. Receipts | Total This Period | Calendar Year-to-Date | | | |
| 11. Contributions (other than loans) From: | | | | | |
| (a) Individuals/Persons Other | | | | | |
| Than Political Committees | 4040.13 | 4040.13 | | | |
| (i) Itemized (use Schedule A) | | | | | |
| (ii) Unitemized | 4032.84 | 4032.84 | | | |
| (iii) TOTAL (add | | | | | |
| Lines 11(a)(i) and (ii)▶ | 8072.97 | 8072.97 | | | |
| (b) Political Party Committees | 0.00 | 0.00 | | | |
| (c) Other Political Committees | | | | | |
| (such as PACs) | 5000.00 | 5000.00 | | | |
| (d) Total Contributions (add Lines | | | | | |
| 11(a)(iii), (b), and (c)) (Carry | | 40070.07 | | | |
| Totals to Line 33, page 5)▶ | 13072.97 | 13072.97 | | | |
| 12. Transfers From Affiliated/Other | | 0.00 | | | |
| Party Committees | 0.00 | 0.00 | | | |
| 13. All Loans Received | 0.00 | 0.00 | | | |
| To. All Louis Hoodwar | | 7 7 | | | |
| 14. Loan Repayments Received | 0.00 | 0.00 | | | |
| 15. Offsets To Operating Expenditures | 7 | | | | |
| (Refunds, Rebates, etc.) | | | | | |
| (Carry Totals to Line 37, page 5) | 0.00 | 0.00 | | | |
| 16. Refunds of Contributions Made | | | | | |
| to Federal Candidates and Other | | | | | |
| Political Committees | 0.00 | 0.00 | | | |
| 17. Other Federal Receipts | 0.00 | 0.00 | | | |
| (Dividends, Interest, etc.) | | 0.00 | | | |
| (a) Non-Federal Account | muo | | | | |
| (from Schedule H3) | 0.00 | 0.00 | | | |
| , | 7 | | | | |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 | | | |
| (3) | | | | | |
| (c) Total Transfers (add 18(a) and 18(b)). | 0.00 | 0.00 | | | |
| | | | | | |
| 19. Total Receipts (add Lines 11(d), | | | | | |
| 12, 13, 14, 15, 16, 17, and 18(c))▶ | 13072.97 | 13072.97 | | | |
| 20. Total Federal Receipts | | | | | |
| (subtract Line 18(c) from Line 19)▶ | 13072.97 | 13072.97 | | | |
| (5.5.5.5.5.5.5.5.6.6.7.6.6.7.6.7.6.7.6.7. | | 3 3 2 3 | | | |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date | | |
|---|----------------------------|-----------------------------------|--|--|
| . Operating Expenditures: — (a) Allocated Federal/Non-Federal | | Calcillati icar-to-Date | | |
| Activity (from Schedule H4) | | | | |
| (i) Federal Share | 0.00 | 0.00 | | |
| (ii) Non Fodousi Ohana | 0.00 | 0.00 | | |
| (ii) Non-Federal Share(b) Other Federal Operating | 0.00 | 0.00 | | |
| (b) Other Federal Operating Expenditures | 0.00 | 0.00 | | |
| (c) Total Operating Expenditures | 7 | | | |
| (add 21(a)(i), (a)(ii), and (b))▶ | 0.00 | 0.00 | | |
| Transfers to Affiliated/Other Party | | | | |
| Contributions to | 0.00 | 0.00 | | |
| Contributions to Federal Candidates/Committees and Other Political Committees | 76000.00 | 76000.00 | | |
| Independent Expenditures | 7 | | | |
| (use Schedule E) | 0.00 | 0.00 | | |
| Coordinated Party Expenditures | | | | |
| (2 U.S.C. §441a(d)) (use Schedule F) | 0.00 | 0.00 | | |
| | 200 | | | |
| Loan Repayments Made | 0.00 | 0.00 | | |
| Loans Made | 0.00 | 0.00 | | |
| Refunds of Contributions To: | | | | |
| (a) Individuals/Persons Other Than Political Committees | 5.00 | 5.00 | | |
| - | | | | |
| (b) Political Party Committees | 0.00 | 0.00 | | |
| (c) Other Political Committees | | 0.00 | | |
| (such as PACs) | 0.00 | 0.00 | | |
| (d) Total Contribution Refunds | | | | |
| (add Lines 28(a), (b), and (c))▶ | 5.00 | 5.00 | | |
| | | | | |
| Other Disbursements | 0.00 | 0.00 | | |
| F | | | | |
| Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity | | | | |
| (from Schedule H6) | | | | |
| (i) Federal Share | 0.00 | 0.00 | | |
| | | | | |
| (ii) "Levin" Share | 0.00 | 0.00 | | |
| (b) Federal Election Activity Paid Entirely | 0.00 | 0.00 | | |
| With Federal Funds | 0.00 | 0.00 | | |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶ | 0.00 | 0.00 | | |
| Lines sociality, sociality and sociality | 3.00 | 0.00 | | |
| Total Disbursements (add Lines 21(c), 22, | | | | |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 76005.00 | 76005.00 | | |
| _ | 7 | | | |
| Total Federal Disbursements | | | | |
| (subtract Line 21(a)(ii) and Line 30(a)(ii) | 76005.00 | 76005 00 | | |
| from Line 31) | 76005.00 | 76005.00 | | |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 3. Total Contributions (other than loans) (from Line 11(d), page 3) | 13072.97 | 13072.97 |
| 4. Total Contribution Refunds (from Line 28(d)) | 5.00 | 5.00 |
| 5. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 13067.97 | 13067.97 |
| 6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00 | 0.00 |
| 7. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 0.00 |

FOR LINE NUMBER: **PAGE** Use separate schedule(s) (check only one) X 11a 11b 11c

6 OF 14

for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Ms. Paula Egan Date of Receipt Mailing Address 200 Day Hill Road 2015 01 13 City State Zip Code Transaction ID: 64225004 CT Windsor 06095-1779 Amount of Each Receipt this Period FEC ID number of contributing C 260.00 federal political committee. Name of Employer Occupation Vice President Vantis Life Insurance Company Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name (Last, First, Middle Initial) B. Mr. Michael S. Dal Zin Date of Receipt Mailing Address 200 Day Hill Road 01 13 2015 City State Zip Code Transaction ID: 64225005 CT Windsor 06095-1779 Amount of Each Receipt this Period FEC ID number of contributing 260.00 federal political committee. Name of Employer Occupation Vantis Life Insurance Company VΡ Receipt For: Aggregate Year-to-Date ▼ Primary General 260.00 Other (specify) Full Name (Last, First, Middle Initial) c. Ms. Carolyn C. Cobb Date of Receipt Mailing Address 101 Constitution Ave, NW 01 31 2015 Suite 700 City Zip Code State Transaction ID: PR1821819639279 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing 237.29 С federal political committee. Name of Employer Occupation American Council of Life Insurers Vice President & Associate General Cou Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$122.55 Semi-Monthly) 237.29 Other (specify) 757.29 SUBTOTAL of Receipts This Page (optional).....

- 9

9

TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

| FOR LINE NUMBER: | | | | | PAGE | 7 | OF | 14 |
|------------------|-----|--|-----|--|------|----|----|----|
| (check only one) | | | | | | | | |
| X | 11a | | 11b | | 11c | 12 | 2 | |
| | 13 | | 14 | | 15 | 16 | 6 | 17 |

| | e name and address of any political committee to | |
|---|---|---|
| Full Name (Last, First, Middle Initial) The Honora Dirk A. Kempthorne Mailing Address 101 Constitution Ave, NW Suite 700 City Washington FEC ID number of contributing federal political committee. Name of Employer American Council of Life Insurers Receipt For: Primary General Other (specify) | State Zip Code DC 20001-2133 C Occupation President and CEO Aggregate Year-to-Date ▼ 416.66 | Date of Receipt O1 31 2015 Transaction ID: PR1871324539279 Amount of Each Receipt this Period 416.66 P/R Deduction (\$208.33 Semi-Monthly) |
| Full Name (Last, First, Middle Initial) Mr. Brian Waidmann Mailing Address 101 Constitution Ave, NW Suite 700 City Washington FEC ID number of contributing federal political committee. Name of Employer | State Zip Code DC 20001-2133 C Occupation | Date of Receipt 101 31 2015 Transaction ID: PR1872428339279 Amount of Each Receipt this Period 400.00 |
| American Council of Life Insurers Receipt For: Primary General Other (specify) ▼ | Chief of Staff Aggregate Year-to-Date ▼ 400.00 | P/R Deduction (\$200.00 Semi-Monthly) |
| Full Name (Last, First, Middle Initial) Gregory Roto Mailing Address 200 Day Hill Road City Windsor FEC ID number of contributing federal political committee. Name of Employer Vantis Life Insurance Company Receipt For: Primary General Other (specify) | State Zip Code CT 06095-1779 C Occupation VP Aggregate Year-to-Date ▼ 260.00 | Date of Receipt M M M / 31 2015 Transaction ID: PR2285777639279 Amount of Each Receipt this Period 260.00 P/R Deduction (\$260.00 Bi-Weekly) |
| SUBTOTAL of Receipts This Page (optional) | > | 1076.66 |
| TOTAL This Period (last page this line number | only) | |

Use separate schedule(s) for each category of the Detailed Summary Page

| FOR LINE NUMBER: | | | | | PAGE | 8 | OF | | 14 | |
|------------------|---|-----|--|-----|------|-----|----|--|----|----|
| (check only one) | | | | | | | | | | |
| | X | 11a | | 11b | | 11c | 12 | | | |
| | | 13 | | 14 | | 15 | 16 | | | 17 |

| or for commercial purposes, other than using the | ` · | to solicit contributions from such committee. |
|---|--|---|
| American Council of Life Insure | ers Political Action Committee | T |
| Full Name (Last, First, Middle Initial) Mr. Gary E. Hughes | | Date of Receipt |
| Mailing Address 101 Constitution Avenue, NW Suite 700 West | 1 | 01 31 2015 |
| City | State Zip Code | Transaction ID : PR771358239279 |
| Washington | DC 20001-2133 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 366.62 |
| Name of Employer | Occupation | _ |
| American Council of Life Insurers | Executive Vice President & General Cou | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 366.62 | P/R Deduction (\$188.30 Semi-Monthly) |
| Full Name (Last, First, Middle Initial) Mr. J. Bruce Ferguson | | Date of Receipt |
| Mailing Address 101 Constitution Avenue, NW | | M = M / D = D / Y = Y = Y |
| Suite 700 West City | State Zip Code | 01 31 2015 |
| Washington | DC 20001-2133 | Transaction ID : PR771373239279 |
| | 2000 2 100 | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 316.45 |
| Name of Employer | Occupation | 1 |
| American Council of Life Insurers | Senior Vice President, State Relations | _ |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 316.45 | P/R Deduction (\$162.39 Semi-Monthly) |
| Full Name (Last, First, Middle Initial) . Ms. Kimberly O. Dorgan | | Date of Receipt |
| Mailing Address 101 Constitution Avenue, NW Suite 700 West | | 01 31 2015 |
| City Washington | State Zip Code DC 20001-2133 | Transaction ID : PR771395139279 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 416.66 |
| Name of Employer | Occupation | 1 |
| American Council of Life Insurers | Senior Executive Vice President, Publi | |
| Receipt For: | Aggregate Year-to-Date ▼ | 1 |
| Primary General Other (specify) ▼ | 416.66 | P/R Deduction (\$208.33 Semi-Monthly) |
| SUBTOTAL of Receipts This Page (optional) | | 1099.73 |
| TOTAL This Period (last page this line number | - miles | |

Use separate schedule(s) for each category of the Detailed Summary Page

| FOR LINE NUMBER: | | | | | PAGE | | 9 | OF | | 14 |
|------------------|------------------|--|-----|--|------|--|----|----|--|----|
| (che | (check only one) | | | | | | | | | |
| X | 11a | | 11b | | 11c | | 12 | 2 | | |
| | 13 | | 14 | | 15 | | 16 | 6 | | 17 |

| or for commercial purposes, other than using the | atements may not be sold or used by any personal name and address of any political committee to | |
|--|---|---|
| NAME OF COMMITTEE (In Full) | | |
| American Council of Life Insurer | s Political Action Committee | |
| Full Name (Last, First, Middle Initial) Mr. Morris R. Goff | | Date of Receipt |
| Mailing Address 101 Constitution Avenue, NW | | M = M / D = D / Y = Y = Y |
| Suite 700 West City | State Zip Code | 01 31 2015 |
| City Washington | DC 20001-2133 | Transaction ID : PR771419339279 Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | Amount of Each Receipt this Period |
| Name of Employer | Occupation | |
| American Council of Life Insurers | Vice President, Federal Relations | |
| Receipt For: Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 208.58 | P/R Deduction (\$106.83 Semi-Monthly) |
| Full Name (Last, First, Middle Initial) Mr. David C. Turner | | Date of Receipt |
| Mailing Address 101 Constitution Ave, NW | | M = M / D = D / Y = Y = Y |
| Suite 700 City | State Zip Code | 01 31 2015 |
| Uity Washington | DC 20001-2133 | Transaction ID : PR771428939279 Amount of Each Receipt this Period |
| FEC ID number of contributing | 1000.1.00 | |
| federal political committee. | C | 277.45 |
| Name of Employer | Occupation | |
| American Council of Life Insurers | EVP, Chief of Staff & Corp. Secretary | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 277.45 | P/R Deduction (\$142.11 Semi-Monthly) |
| Full Name (Last, First, Middle Initial) Ms. Alane R. Dent | | Date of Receipt |
| Mailing Address 101 Constitution Ave, NW Suite 700 | | 01 31 / Y Y Y Y Y |
| City Washington | State Zip Code DC 20001-2133 | Transaction ID : PR771444339279 |
| | | Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee. | C | 203.76 |
| Name of Employer | Occupation | |
| American Council of Life Insurers | Vice President, Federal Relations | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| Primary General Other (specify) ▼ | 203.76 | P/R Deduction (\$104.38 Semi-Monthly) |
| SUBTOTAL of Receipts This Page (optional) | > | 689.79 |
| TOTAL This Period (last page this line number o | nly) | 1 1 40 1 1 40 1 1 1 |

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Council of Life Insurers Political Action Committee Full Name (Last, First, Middle Initial) Mr. Maurice A. Perkins Date of Receipt Mailing Address 101 Constitution Ave, NW Suite 700 2015 31 City Zip Code State Transaction ID: PR805149139279 DC Washington 20001-2133 Amount of Each Receipt this Period FEC ID number of contributing C 416.66 federal political committee. Name of Employer Occupation American Council of Life Insurers Vice President, Federal Relations Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$208.33 Semi-Monthly) 416.66 Other (specify) Full Name (Last, First, Middle Initial) В. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 416.66 SUBTOTAL of Receipts This Page (optional)..... 4040.13 TOTAL This Period (last page this line number only).....

| SCHEDULE A (FEC Form 3X) | Use separate schedule(s) | FOR LINE NUMBER: PAGE 11 OF 14 (check only one) | | | |
|---|--|---|--|--|--|
| TEMIZED RECEIPTS | for each category of the Detailed Summary Page | 11a | | | |
| Any information copied from such Reports and State or for commercial purposes, other than using the national state. | | | | | |
| NAME OF COMMITTEE (In Full) American Council of Life Insurers | Political Action Committee | | | | |
| Full Name (Last, First, Middle Initial) A. RGA Reinsurance Company Federal PAG | | Date of Receipt | | | |
| Mailing Address 1370 Timberlake Manor Parkway | | 01 26 2015 | | | |
| City Chesterfield | State Zip Code MO 63017 | Transaction ID : 64225045 Amount of Each Receipt this Period | | | |
| FEC ID number of contributing federal political committee. | C C00461129 | 5000.00 | | | |
| Name of Employer O | ccupation | | | | |
| Receipt For: Primary General Other (specify) ▼ | ggregate Year-to-Date ▼ 5000.00 | | | | |
| Full Name (Last, First, Middle Initial) | | Date of Receipt | | | |
| Mailing Address | | M = M / D = D / Y = Y = Y | | | |
| City | State Zip Code | Amount of Each Receipt this Period | | | |
| FEC ID number of contributing federal political committee. | C | | | | |
| Name of Employer O | ccupation | | | | |
| Receipt For: Primary General Other (specify) ▼ | ggregate Year-to-Date ▼ | | | | |
| Full Name (Last, First, Middle Initial) | | Date of Receipt | | | |
| Mailing Address | | M = M / D = D / Y = Y = Y | | | |
| City | State Zip Code | Amount of Each Receipt this Period | | | |
| FEC ID number of contributing federal political committee. | C | | | | |
| Name of Employer O | ccupation | | | | |
| Receipt For: Primary General Other (specify) ▼ | ggregate Year-to-Date ▼ | | | | |
| SUBTOTAL of Receipts This Page (ontional) | | 5000.00 | | | |

TOTAL This Period (last page this line number only).....

5000.00

| SCHEDULE B (FEC Form 3X) | Llos concrete cabadula/a | FOR LINE NUMBER: PAGE 12 OF 14 | | | | | | | | |
|--|---|---|--|--|--|--|--|--|--|--|
| TEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the Detailed Summary Page | (check only 21b 27 | one) 22 X 23 24 25 28a 28b 28c 29 | | | | | | | |
| Any information copied from such Reports and Stater or for commercial purposes, other than using the nan | | | | | | | | | | |
| | le and address of any politica | committee to | solicit contributions from such committee. | | | | | | | |
| NAME OF COMMITTEE (In Full) | Political Action Comm | ittoo | | | | | | | | |
| American Council of Life Insurers F | Political Action Comm | iittee | | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | 5 | | | | | | | |
| - NRSC | | | Date of Disbursement | | | | | | | |
| Mailing Address 425 2nd Street, NE | | | 01 09 2015 | | | | | | | |
| City | State Zip Code | | Transaction ID - 62652024 | | | | | | | |
| Washington | DC 20002 | | Transaction ID: 63653024 | | | | | | | |
| Purpose of Disbursement Political Contribution | | 011 | Amount of Each Disbursement this Perio | | | | | | | |
| Candidate Name | , | Category/ | 15000.00 | | | | | | | |
| NRSC | | Type | 13000.00 | | | | | | | |
| Office Sought: House Disburser Senate President | nent For: Primary General Other (specify) ▼ | | Political Contribution | | | | | | | |
| State: District: | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | | | | | | | | |
| B. NRCC | | | Date of Disbursement | | | | | | | |
| Martin Address To Table | | | M M / D D / Y Y Y Y Y | | | | | | | |
| Mailing Address 320 First Street, SE | | | 01 09 2015 | | | | | | | |
| - | State Zip Code | | Transaction ID : 63653027 | | | | | | | |
| Washington Purpose of Disbursement | DC 20003 | | | | | | | | | |
| Political Contribution | | 011 | Amount of Each Disbursement this Perio | | | | | | | |
| Candidate Name | I | Catagony | | | | | | | | |
| NRCC | | Category/ Type | 15000.00 | | | | | | | |
| Office Sought: House Disburser | nent For: | | | | | | | | | |
| Senate | Primary General | | Political Contribution | | | | | | | |
| President | Other (specify) ▼ | | | | | | | | | |
| State: District: | | | | | | | | | | |
| Full Name (Last, First, Middle Initial) - DSCC | | | Date of Disbursement | | | | | | | |
| - 5000 | | | M M / D D / Y Y Y Y | | | | | | | |
| Mailing Address 120 Maryland Avenue, NE | 01 09 2015 | | | | | | | | | |
| City | State Zip Code | | Transaction ID - 02052222 | | | | | | | |
| Washington | DC 20006 | | Transaction ID: 63653032 | | | | | | | |
| Purpose of Disbursement Political Contribution | | | | | | | | | | |
| | 011 | Amount of Each Disbursement this Period | | | | | | | | |
| Candidate Name DSCC | | Category/ | 15000.00 | | | | | | | |
| Office Sought: House Disburser | ment For: | Туре | | | | | | | | |
| Senate Disburser | Primary General | | Political Contribution | | | | | | | |
| President | Other (specify) | | Political Contribution | | | | | | | |
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| SCHEDULE B (FEC Form 3X) | | FOR LINE NUMBER: PAGE 13 OF 14 | | | | | | | | | |
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| ITEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the | (check only | one) | | | | | | | | |
| | Detailed Summary Page | 21b 27 | 22 X 23 24 25 26 28a 28b 28c 29 30b | | | | | | | | |
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| or for commercial purposes, other than using the nam | | | | | | | | | | | |
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| American Council of Life Insurers P | olitical Action Comr | nittee | | | | | | | | | |
| Full Name (Last, First, Middle Initial) | | | Data of Dishuwaamant | | | | | | | | |
| A. DCCC | | | Date of Disbursement | | | | | | | | |
| Mailing Address 430 South Capitol Street, SE | | | 01 09 2015 | | | | | | | | |
| 2nd Floor | | | | | | | | | | | |
| • | tate Zip Code DC 20003 | | Transaction ID: 63653042 | | | | | | | | |
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| Full Name (Last, First, Middle Initial) | | | | | | | | | | | |
| B. Republican Main Street Partnership | PAC | | Date of Disbursement | | | | | | | | |
| Mailing Address C/O G&W 2201 Wisconsin Ave. NV Suite 320 | | | 01 09 2015 | | | | | | | | |
| | tate Zip Code DC 20007 | | Transaction ID : 63653043 | | | | | | | | |
| Washington Purpose of Disbursement | DC 20007 | | | | | | | | | | |
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| C. Congressional Black Caucus PAC | Date of Disbursement | | | | | | | | | | |
| Malling Address B.O. D. Tools | | | M M / D D / Y Y Y Y | | | | | | | | |
| Mailing Address P.O. Box 70980 | | | 01 09 2015 | | | | | | | | |
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| В. | Friends Of Chris Murphy | | | | | | Date o | T DISC | ourser | nent | | | | |
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